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8 UNITED STATES DISTRICT COURT
9 WESTERN DISTRICT OF WASHINGTON
10 AT TACOMA

11 WAYNE A. RANKIN,

12 Plaintiff,

13 v.

14 MICHAEL J. ASTRUE, Commissioner of
Social Security,

15 Defendant.
16

CASE NO. C07-5558FDB-KLS

REPORT AND
RECOMMENDATION

Noted for August 29, 2008

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19 Plaintiff, Wayne A. Rankin, has brought this matter for judicial review of the denial of his
20 application for disability insurance benefits. This matter has been referred to the undersigned Magistrate
21 Judge pursuant to 28 U.S.C. § 636(b)(1)(B) and Local Rule MJR 4(a)(4) and as authorized by Mathews,
22 Secretary of H.E.W. v. Weber, 423 U.S. 261 (1976). After reviewing the parties' briefs and the remaining
23 record, the undersigned submits the following Report and Recommendation for the Honorable Franklin D.
24 Burgess's review.

25 FACTUAL AND PROCEDURAL HISTORY

26 Plaintiff currently is 47 years old.¹ Tr. 24. He has a high school education and past work
27

28 ¹Plaintiff's date of birth has been redacted in accordance with the General Order of the Court regarding Public Access to
Electronic Case Files, pursuant to the official policy on privacy adopted by the Judicial Conference of the United States.

1 experience as a mail carrier, mail handler and stamp seller. Tr. 22, 316, 350.

2 On June 12, 2006, plaintiff filed an application for disability insurance benefits, alleging disability
3 as of June 2, 2006, due to testicular cancer, a back injury, knee problems, esophageal reflux, a fatty liver,
4 hyperlipidemia, sleep apnea, obesity, osteoarthritis, degenerative joint of the knee, and plantar fasciitis. Tr.
5 22, 24, 61-63, 79. His application was denied initially and on reconsideration. Tr. 24-26, 35, 38. A
6 hearing was held before an administrative law judge (“ALJ”) on April 24, 2007, at which plaintiff,
7 represented by counsel, appeared and testified, as did a vocational expert. Tr. 312-56.

8 On May 23, 2007, the ALJ issued a decision, determining plaintiff to be not disabled, finding
9 specifically in relevant part:

- 10 (1) at step one of the sequential disability evaluation process,² plaintiff had not
11 engaged in substantial gainful activity since his alleged onset date of disability;
- 12 (2) at step two, plaintiff had “severe” impairments consisting of residuals from
13 testicular cancer, sleep apnea, degenerative joint disease of the hips and knee,
14 hernia issues, and obesity;
- 15 (3) at step three, none of plaintiff’s impairments met or equaled the criteria of any
16 of those listed in 20 C.F.R. Part 404, Subpart P, Appendix 1;
- 17 (4) at step four, plaintiff had the residual functional capacity to perform a modified
18 range of sedentary work, which precluded him from performing his past
19 relevant work; and
- 20 (5) at step five, plaintiff was capable of performing other jobs existing in significant
21 numbers in the national economy.

22 Tr. 15-23. Plaintiff’s request for review was denied by the Appeals Council on August 17, 2007, making
23 the ALJ’s decision the Commissioner’s final decision. Tr. 4; 20 C.F.R. § 404.981.

24 On October 8, 2007, plaintiff filed a complaint in this Court seeking review of the ALJ’s decision.
25 (Dkt. #1-#3). The administrative record was filed on January 14, 2008. (Dkt. #11). Specifically, plaintiff
26 argues that decision should be reversed and remanded for further administrative proceedings for the
27 following reasons:

- 28 (a) the ALJ erred in evaluating the opinion of his treating physician;
- (b) the ALJ erred in assessing plaintiff’s credibility; and

²The Commissioner employs a five-step “sequential evaluation process” to determine whether a claimant is disabled. See 20 C.F.R. § 404.1520; 20 C.F.R. § 416.920. If the claimant is found disabled or not disabled at any particular step, the disability determination is made at that step, and the sequential evaluation process ends. Id.

1 (c) the ALJ erred in finding plaintiff capable of performing other work existing in
2 significant numbers in the national economy.

3 The undersigned agrees the ALJ erred in determining plaintiff to be not disabled, and, for the reasons set
4 forth below, recommends that the ALJ's decision should be reversed and this matter should be remanded
5 to the Commissioner for further administrative proceedings. Although plaintiff requests oral argument in
6 this matter, the undersigned finds such argument to be unnecessary here.

7 DISCUSSION

8 This Court must uphold the Commissioner's determination that plaintiff is not disabled if the
9 Commissioner applied the proper legal standard and there is substantial evidence in the record as a whole
10 to support the decision. Hoffman v. Heckler, 785 F.2d 1423, 1425 (9th Cir. 1986). Substantial evidence is
11 such relevant evidence as a reasonable mind might accept as adequate to support a conclusion. Richardson
12 v. Perales, 402 U.S. 389, 401 (1971); Fife v. Heckler, 767 F.2d 1427, 1429 (9th Cir. 1985). It is more than
13 a scintilla but less than a preponderance. Sorenson v. Weinberger, 514 F.2d 1112, 1119 n.10 (9th Cir.
14 1975); Carr v. Sullivan, 772 F. Supp. 522, 524-25 (E.D. Wash. 1991). If the evidence admits of more than
15 one rational interpretation, the Court must uphold the Commissioner's decision. Allen v. Heckler, 749
16 F.2d 577, 579 (9th Cir. 1984).

17 I. The ALJ Erred in Evaluating the Opinion of Plaintiff's Treating Physician

18 The ALJ is responsible for determining credibility and resolving ambiguities and conflicts in the
19 medical evidence. Reddick v. Chater, 157 F.3d 715, 722 (9th Cir. 1998). Where the medical evidence in
20 the record is not conclusive, "questions of credibility and resolution of conflicts" are solely the functions
21 of the ALJ. Sample v. Schweiker, 694 F.2d 639, 642 (9th Cir. 1982). In such cases, "the ALJ's conclusion
22 must be upheld." Morgan v. Commissioner of the Social Security Administration, 169 F.3d 595, 601 (9th
23 Cir. 1999). Determining whether inconsistencies in the medical evidence "are material (or are in fact
24 inconsistencies at all) and whether certain factors are relevant to discount" the opinions of medical experts
25 "falls within this responsibility." Id. at 603.

26 In resolving questions of credibility and conflicts in the evidence, an ALJ's findings "must be
27 supported by specific, cogent reasons." Reddick, 157 F.3d at 725. The ALJ can do this "by setting out a
28 detailed and thorough summary of the facts and conflicting clinical evidence, stating his interpretation
thereof, and making findings." Id. The ALJ also may draw inferences "logically flowing from the

1 evidence.” Sample, 694 F.2d at 642. Further, the Court itself may draw “specific and legitimate inferences
2 from the ALJ’s opinion.” Magallanes v. Bowen, 881 F.2d 747, 755, (9th Cir. 1989).

3 The ALJ must provide “clear and convincing” reasons for rejecting the uncontradicted opinion of
4 either a treating or examining physician. Lester v. Chater, 81 F.3d 821, 830 (9th Cir. 1996). Even when a
5 treating or examining physician’s opinion is contradicted, that opinion “can only be rejected for specific
6 and legitimate reasons that are supported by substantial evidence in the record.” Id. at 830-31. However,
7 the ALJ “need not discuss *all* evidence presented” to him or her. Vincent on Behalf of Vincent v. Heckler,
8 739 F.3d 1393, 1394-95 (9th Cir. 1984) (citation omitted) (emphasis in original). The ALJ must only
9 explain why “significant probative evidence has been rejected.” Id.; see also Cotter v. Harris, 642 F.2d
10 700, 706-07 (3rd Cir. 1981); Garfield v. Schweiker, 732 F.2d 605, 610 (7th Cir. 1984).

11 In general, more weight is given to a treating physician’s opinion than to the opinions of those who
12 do not treat the claimant. Lester, 81 F.3d at 830. On the other hand, an ALJ need not accept the opinion of
13 a treating physician, “if that opinion is brief, conclusory, and inadequately supported by clinical findings”
14 or “by the record as a whole.” Batson v. Commissioner of Social Security Administration, 359 F.3d 1190,
15 1195 (9th Cir. 2004); Thomas v. Barnhart, 278 F.3d 947, 957 (9th Cir. 2002); Tonapetyan v. Halter, 242
16 F.3d 1144, 1149 (9th Cir. 2001). An examining physician’s opinion is “entitled to greater weight than the
17 opinion of a nonexamining physician.” Lester, 81 F.3d at 830-31. A non-examining physician’s opinion
18 may constitute substantial evidence if “it is consistent with other independent evidence in the record.” Id.
19 at 830-31; Tonapetyan, 242 F.3d at 1149.

20 On November 18, 2005, plaintiff’s treating physician, Jorge Mata, D.O., diagnosed plaintiff with
21 degenerative joint disease of the right knee. Tr. 132. Dr. Mata stated that he asked plaintiff “to go ahead
22 and reduce weightbearing, such as using lean bars or trying to do a little bit more sitting versus standing,”
23 and to engage in “just a little bit of weight loss.” Id. Dr. Mata also asked plaintiff to restrict “repetitive
24 bending, such as climbing stairs or getting out of the chair and to avoid direct pressure to his right knee.”
25 Id. Plaintiff argues the ALJ erred in failing to address this last opinion in his decision. Defendant argues
26 the ALJ did discuss that opinion in his decision (see Tr. 17), and that the residual functional capacity with
27 which the ALJ assessed plaintiff properly accounted for the limitations found by Dr. Mata by restricting
28 plaintiff to a modified range of sedentary work involving only occasional bending, squatting, kneeling, and

1 stooping (see Tr. 20).

2 The undersigned, however, finds the ALJ erred here. It is true that the ALJ did mention the
3 opinion provided by Dr. Mata on November 18, 2005, noting specifically that Dr. Mata told plaintiff “to
4 do more sitting rather than standing and that he should do less lifting and no repetitive bending.” Tr. 17.
5 Plaintiff’s assertion that the ALJ did not address Dr. Mata’s opinion, therefore, is without merit. On the
6 other hand, the ALJ’s restriction to only occasional bending, squatting, kneeling, and stooping did not
7 adequately account for all of the limitations imposed by Dr. Mata. This is because it failed to include the
8 additional limitations Dr. Mata regarding climbing stairs, getting in and out of chairs and avoiding direct
9 pressure on the right knee. The ALJ should have including those limitations or explained why he did not
10 do so, and his failure in that regard was error.

11 II. The ALJ Erred in Assessing Plaintiff’s Credibility

12 Questions of credibility are solely within the control of the ALJ. Sample v. Schweiker, 694 F.2d
13 639, 642 (9th Cir. 1982). The Court should not “second-guess” this credibility determination. Allen, 749
14 F.2d at 580. In addition, the Court may not reverse a credibility determination where that determination is
15 based on contradictory or ambiguous evidence. Id. at 579. That some of the reasons for discrediting a
16 claimant’s testimony should properly be discounted does not render the ALJ’s determination invalid, as
17 long as that determination is supported by substantial evidence. Tonapetyan v. Halter, 242 F.3d 1144, 1148
18 (9th Cir. 2001).

19 To reject a claimant’s subjective complaints, the ALJ must provide “specific, cogent reasons for
20 the disbelief.” Lester v. Chater, 81 F.3d 821, 834 (9th Cir. 1996) (citation omitted). The ALJ “must
21 identify what testimony is not credible and what evidence undermines the claimant’s complaints.” Id.;
22 Dodrill v. Shalala, 12 F.3d 915, 918 (9th Cir. 1993). Unless affirmative evidence shows the claimant is
23 malingering, the ALJ’s reasons for rejecting the claimant’s testimony must be “clear and convincing.”
24 Lester, 81 F.2d at 834. The evidence as a whole must support a finding of malingering. O’Donnell v.
25 Barnhart, 318 F.3d 811, 818 (8th Cir. 2003).

26 In determining a claimant’s credibility, the ALJ may consider “ordinary techniques of credibility
27 evaluation,” such as reputation for lying, prior inconsistent statements concerning symptoms, and other
28 testimony that “appears less than candid.” Smolen v. Chater, 80 F.3d 1273, 1284 (9th Cir. 1996). The ALJ

1 also may consider a claimant's work record and observations of physicians and other third parties
2 regarding the nature, onset, duration, and frequency of symptoms. Id.

3 Plaintiff argues that while the ALJ noted he had testified that he "could sit for 30-45 minutes at a
4 time" and "could only sit a couple hours in an eight hour day," the ALJ gave no good reasons for failing to
5 adopt this testimony, stating only that plaintiff was able to "do work that was mainly sitting until he retired
6 from work and there is no evidence of significant change in his condition since then." Tr. 19, 21, 341-42.
7 The undersigned agrees. The evidence in the record does not support a finding that plaintiff's work during
8 the period prior to his retirement was mainly sitting. With respect to that work, plaintiff testified that
9 while a chair was provided for him, it's feasibility in terms of use while performing his job tasks was
10 limited. Tr. 320-21. Plaintiff further testified that he would sit for at most an hour out of a period of eight
11 hours, and that the rest of the day he would stand. Tr. 321-22. The ALJ gave no other valid, specific
12 reason for finding that plaintiff lacked credibility regarding this limitation.

13 Plaintiff also argues the ALJ erred in rejecting his testimony that he has to rest for between one half
14 hour and two hours per day in the afternoon due to fatigue. See Tr. 335-36, 344. With respect to plaintiff's
15 fatigue, the ALJ found as follows:

16 . . . He reports headaches and fatigue, but he has also reported that his CPAP machine
17 was broken. His headaches and fatigue might improve significantly when his sleep
18 apnea is appropriately treated. . . . While the claimant may currently take regular naps,
19 this may be due to the fact that he can take these naps since he is not working. If he
20 pursues treatment for his apnea, it is reasonable to conclude that he would not need
21 regular naps at work.

22 Tr. 21-22. Plaintiff argues these are not valid reasons for discounting his credibility on this issue. Again,
23 the undersigned agrees. As plaintiff points out, there is no express evidence in the record to support the
24 ALJ's conclusion that his naps are voluntary, rather than due to fatigue. While certainly not working may
25 make taking naps easier, this does not necessarily mean they are not actually needed.

26 The record also fails to show that plaintiff's fatigue would improve significantly if his sleep apnea
27 was appropriately treated. Thus, while plaintiff did report in early April 2007, that he thought his tiredness
28 was in part "related to [his] broken CPAP machine" (Tr. 285), in early-September 2006, he reported that
he had been using a CPAP machine, but found it did "not entirely relive [sic] his somnolence and that even
when using it," he woke "himself snoring" (Tr. 224). Accordingly, even when using his CPAP machine,
plaintiff still apparently experienced fatigue. Whether further or different treatment for his sleep apnea

1 would cure his fatigue, the evidence in the record provides no indication.³ As such, the undersigned finds
2 this reason for discounting plaintiff's credibility to have been improper as well.

3 Plaintiff next argues he has been diagnosed with an adjustment disorder and has problems that
4 cause him pain, which could reasonably result in problems with concentration. In regard to such problems,
5 the ALJ found that:

6 The claimant also mentioned some problems concentrating. While there is mention of
7 fatigue in the record, I note that the claimant reads, goes to church three times a week,
8 watches television, etc. There is no indication that he has any significant problem in
mentally concentrating on these tasks. Therefore, I find that he has no severe mental
impairment giving rise to any difficulty concentrating.

9 Tr. 20. Plaintiff asserts the above activities are not inconsistent with his testimony that he has difficulty
10 concentrating. The undersigned disagrees. Reading, attending church and watching television certainly
11 require the ability to concentrate. Plaintiff has pointed to no evidence in the record indicating that he has
12 any problem attending to these activities as found by the ALJ. Accordingly, the undersigned finds no error
13 to have been committed here.

14 The ALJ also discounted plaintiff's credibility for the following reason:

15 The record shows that the claimant left work on a medical retirement. He was able to
16 continue working at a light duty position until the retirement was approved. He told his
17 doctor that he was going to work for a few more months and then leave, and that is
what he did. This suggests that he was able to perform the light duty work that had
been assigned him.

18 Tr. 21; see also Tr. 203. Plaintiff does not specifically challenge this basis for discounting his credibility.
19 Indeed, as noted above, plaintiff's work prior to retiring consisted mostly of standing, rather than sitting.
20 Nevertheless, the record indicates that plaintiff's retirement likely was due to medical reasons. See Tr.
21 324-25. As such, it is not entirely clear plaintiff would have been able to continue performing his previous
22 work at the light level of activity. As such, the undersigned cannot necessarily say this was a valid basis
23 upon which the ALJ found plaintiff to be not fully credible.

24 The ALJ found as well that plaintiff was "able to engage in a number of activities throughout his
25 day," and that there was "no indication that his reliability in attending to the tasks he" chose to do had

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27 ³Defendant argues the record shows plaintiff's fatigue complaints generally were adequately addressed by medication.
28 As an example, defendant points to a treatment note dated July 10, 2006, indicating that he was prescribed Ritalin in addition to
Prozac. Tr. 189-90. This, however, fails to show what benefit, if any, plaintiff received from that prescription. Defendant also
points to the fact that plaintiff reported in early August 2006, that he was "doing fairly well," and that "the small trial dose of Ritalin
actually helped him get motivated," and he was "now a little bit more active." Tr. 183. Again, though, this does not demonstrate
that plaintiff's fatigue was in fact diminished, or at least diminished to the point where it did not affect him.

1 “been impacted.” Tr. 21. To determine whether a claimant’s symptom testimony is credible, the ALJ may
2 consider his or her daily activities. Smolen, 80 F.3d at 1284. Such testimony may be rejected if the
3 claimant “is able to spend a substantial part of his or her day performing household chores or other
4 activities that are transferable to a work setting.” Id. at 1284 n.7. The claimant need not be “utterly
5 incapacitated” to be eligible for disability benefits, however, and “many home activities may not be easily
6 transferable to a work environment.” Id.

7 Among the activities the ALJ found plaintiff engaged in were the following:

8 He [plaintiff] said that he prepared light meals. He rested in the afternoon and napped.
9 He said that if it was raining he could sleep all day. He said that he had joint custody
10 with his son. He could use a computer, but he only uses one finger typing. He went
fishing three times last year. He goes to church three times a week. . . . He took out
garbage and folded laundry.

11 Tr. 19. Plaintiff here too does not specifically challenge this stated reason for discounting his credibility.
12 Again, however, the undersigned finds it to be suspect. This is because the record does not clearly show
13 that plaintiff is able to spend a substantial part of his day doing these activities. Nor did the ALJ explain
14 how those activities are transferrable to a work setting. Indeed, napping, attending church three times a
15 week and going fishing three times in one year hardly meet this standard. In addition, while taking out the
16 garbage, folding laundry and using a computer certainly may be work-related, the record fails to indicate
17 the frequency with which plaintiff engaged in such activities.

18 Lastly, the ALJ discounted plaintiff’s credibility because his treating physician did not prescribe
19 any narcotic pain medication. Tr. 21. This was proper. Fair v. Bowen, 885 F.2d 597, 603 (9th Cir. 1989);
20 see also Meanal v. Apfel, 172 F.3d 1111, 1114 (9th Cir. 1999) (ALJ properly considered physician’s
21 failure to prescribe, and claimant’s failure to request serious medical treatment for supposedly excruciating
22 pain); Johnson v. Shalala, 60 F.3d 1428, 1434 (9th Cir. 1995) (ALJ properly found prescription of
23 physician for conservative treatment only to be suggestive of lower level of pain and functional limitation).
24 Overall, though, the undersigned finds the ALJ’s reasons for discounting plaintiff’s credibility in this case
25 to be insufficient. See Tonapetyan, 242 F.3d at 1148. Accordingly, remand for further consideration of
26 plaintiff’s credibility is warranted.

27 III. The ALJ’s Step Five Analysis

28 If a disability determination “cannot be made on the basis of medical factors alone at step three of

1 the evaluation process,” the ALJ must identify the claimant’s “functional limitations and restrictions” and
2 assess his or her “remaining capacities for work-related activities.” SSR 96-8p, 1996 WL 374184 *2. A
3 claimant’s residual functional capacity (“RFC”) assessment is used at step four to determine whether he or
4 she can do his or her past relevant work, and at step five to determine whether he or she can do other work.
5 Id. It thus is what the claimant “can still do despite his or her limitations.” Id.

6 A claimant’s residual functional capacity is the maximum amount of work the claimant is able to
7 perform based on all of the relevant evidence in the record. Id. However, a claimant’s inability to work
8 must result from his or her “physical or mental impairment(s).” Id. Thus, the ALJ must consider only
9 those limitations and restrictions “attributable to medically determinable impairments.” Id. In assessing a
10 claimant’s RFC, the ALJ also is required to discuss why the claimant’s “symptom-related functional
11 limitations and restrictions can or cannot reasonably be accepted as consistent with the medical or other
12 evidence.” Id. at *7.

13 If a claimant cannot perform his or her past relevant work, at step five of the disability evaluation
14 process the ALJ must show there are a significant number of jobs in the national economy the claimant is
15 able to do. Tackett v. Apfel, 180 F.3d 1094, 1098-99 (9th Cir. 1999); 20 C.F.R. § 404.1520(d), (e). The
16 ALJ can do this through the testimony of a vocational expert or by reference to the Commissioner’s
17 Medical-Vocational Guidelines (the “Grids”). Tackett, 180 F.3d at 1100-1101; Osenbrock v. Apfel, 240
18 F.3d 1157, 1162 (9th Cir. 2000).

19 An ALJ’s findings will be upheld if the weight of the medical evidence supports the hypothetical
20 posed by the ALJ. Martinez v. Heckler, 807 F.2d 771, 774 (9th Cir. 1987); Gallant v. Heckler, 753 F.2d
21 1450, 1456 (9th Cir. 1984). The vocational expert’s testimony therefore must be reliable in light of the
22 medical evidence to qualify as substantial evidence. Embrey v. Bowen, 849 F.2d 418, 422 (9th Cir. 1988).
23 Accordingly, the ALJ’s description of the claimant’s disability “must be accurate, detailed, and supported
24 by the medical record.” Embrey, 849 F.2d at 422 (citations omitted). The ALJ, however, may omit from
25 that description those limitations he or she finds do not exist. Rollins v. Massanari, 261 F.3d 853, 857 (9th
26 Cir. 2001).

27 The ALJ assessed plaintiff with the residual functional capacity “to stand and walk two hours in an
28 eight hour day, for 10-15 minutes at a time,” to “not lift more than ten pounds” and to “only occasionally

1 bend, squat, kneel, or stoop.” Tr. 20. At the hearing, the ALJ posed the following hypothetical question to
2 the vocational expert:

3 . . . [L]et’s assume we have a younger individual, high school education and the past
4 work as is described and the big problem, at least initially, was the cancer and the
5 secondary affects of chemotherapy and then there’s the back, hip, knees, hernia, obesity
6 as mentioned, sleep apnea as mentioned and there was also a mention of headaches in
7 the record. General consensus seems to be sedentary, but with some limitations on
8 walking even beyond that, maybe 15/20 minutes at a time for a total of a couple hours a
9 day and non-exertion I think postural, postural limitations are the big one, range of
10 motion in terms of bending, kneeling, stooping, squatting and that sort of thing. . . .

11 Tr. 350-51. In response to that question, the vocational expert testified that there were two jobs plaintiff
12 could do: telephone quotation clerk and small products assembler. Tr. 351. Based on the testimony of the
13 vocational expert, the ALJ found plaintiff to be capable of performing other jobs existing in significant
14 numbers in the national economy. Tr. 22-23.

15 Plaintiff argues the ALJ erred in posing the hypothetical question to the vocational expert that he
16 did, because that question did not include the same limitations as contained in his assessment of plaintiff’s
17 residual functional capacity. Specifically, plaintiff asserts that while the RFC assessment limited him to
18 standing and walking for 10 to 15 minutes at a time, the hypothetical question limited him to walking 15 to
19 20 minutes at a time. Defendant acknowledges the discrepancy between the two, but argues it was a
20 typographical error, because the 10 to 15 minute limitation is not supported by the medical evidence in the
21 record. In the alternative, defendant argues that any error that occurred here was harmless, because the
22 jobs identified by the vocational expert incorporated the ability to walk for 15 minutes, and so would not
23 necessarily be precluded by the more restrictive limitation.

24 The undersigned finds defendant’s arguments unpersuasive. First, as noted by plaintiff, nothing in
25 the record indicates that the standing and walking limitation contained in the ALJ’s residual functional
26 capacity assessment was a typographical error, rather than a failure by the ALJ to make sure that limitation
27 matched the one he included in the hypothetical question he posed. While defendant asserts that the 10 to
28 15 minute limitation is not supported by the medical evidence in the record, it is not at all clear the ALJ
felt this to be so as well or would not have imposed that limitation anyway. Second, while the two
limitations may overlap at the 15 minute mark, the range of time contemplated in the RFC assessment is
still less than that contemplated by the hypothetical question. As the Court is not a vocational expert, the
undersigned cannot say with any certainty that this difference is insignificant in the world of work.

1 Accordingly, the undersigned agrees with plaintiff that the ALJ erred here.

2 Plaintiff next argues the vocational expert did not give persuasive reasons as to why his testimony
3 regarding the jobs he identified deviated from the definitions of those jobs contained in the Dictionary of
4 Occupational Titles (“DOT”). The vocational expert testified that while the DOT defined the job of small
5 products assembler as being light work, “[a] portion of those” types of jobs in the national economy and in
6 the state of Washington “would be at a sedentary level.” Tr. 351; see also DOT 706.684-022. The failure
7 by the vocational expert to give any reason or support for his deviation from the DOT’s designation of the
8 small products assembler job as being light work, plaintiff asserts, means the ALJ did not meet his burden
9 at step five of the sequential disability evaluation process.

10 The undersigned agrees the ALJ erred here. The ALJ may rely on vocational expert testimony that
11 “contradicts the DOT, but only insofar as the record contains persuasive evidence to support the
12 deviation.” Johnson v. Shalala, 60 F.3d 1428, 1435 (9th Cir. 1995). The ALJ also has the affirmative
13 responsibility to ask the vocational expert about possible conflicts between his or her testimony and
14 information in the DOT. Haddock v. Apfel, 196 F.3d 1084, 1091 (10th Cir. 1999); SSR 00-4p, 2000 WL
15 1898704. Before relying on evidence obtained from a vocational expert to support a finding of not
16 disabled, therefore, the ALJ is required to “elicit a reasonable explanation for any discrepancy” with the
17 DOT. Haddock, 196 F.3d at 1087; SSR 00-4p, 2000 WL 189704 *1. In addition, the ALJ must explain in
18 his or her decision how the discrepancy or conflict was resolved. SSR 00-4p, 2000 WL 189704 *4.

19 The ALJ’s failure to ask the vocational expert regarding the conflict between his testimony and the
20 DOT’s definition of the job of small products assembler, and inquire as to the evidence upon which the
21 vocational expert relied regarding his testimony, was error. However, as pointed out by defendant, there
22 was still the job of telephone quotation clerk, which the vocational expert testified and the DOT defined as
23 being sedentary work, and which the vocational expert also found plaintiff could perform. Tr. 351; see also
24 DOT 237.367-046; 20 C.F.R. § 404.1566(b) (work exists in the national economy when there is significant
25 number of jobs in one or more occupations having requirements which claimant is able to meet with his or
26 her physical or mental abilities and vocational qualifications).

27 The undersigned thus agrees that the ALJ’s error regarding the small products assembler job was
28 harmless. See Stout v. Commissioner, Social Security Admin., 454 F.3d 1050, 1055 (9th Cir. 2006) (error

1 harmless where inconsequential to ALJ's ultimate disability conclusion). Nevertheless, given the other
2 errors discussed above, remand for further consideration of plaintiff's ability to perform other jobs existing
3 in significant numbers in the national economy is still warranted.

4 IV. This Matter Should Be Remanded for Further Administrative Proceedings

5 The Court may remand this case "either for additional evidence and findings or to award benefits."
6 Smolen, 80 F.3d at 1292. Generally, when the Court reverses an ALJ's decision, "the proper course,
7 except in rare circumstances, is to remand to the agency for additional investigation or explanation."
8 Benecke v. Barnhart, 379 F.3d 587, 595 (9th Cir. 2004) (citations omitted). Thus, it is "the unusual case in
9 which it is clear from the record that the claimant is unable to perform gainful employment in the national
10 economy," that "remand for an immediate award of benefits is appropriate." Id.

11 Benefits may be awarded where "the record has been fully developed" and "further administrative
12 proceedings would serve no useful purpose." Smolen, 80 F.3d at 1292; Holohan v. Massanari, 246 F.3d
13 1195, 1210 (9th Cir. 2001). Specifically, benefits should be awarded where:

14 (1) the ALJ has failed to provide legally sufficient reasons for rejecting [the claimant's]
15 evidence, (2) there are no outstanding issues that must be resolved before a
16 determination of disability can be made, and (3) it is clear from the record that the ALJ
would be required to find the claimant disabled were such evidence credited.

17 Smolen, 80 F.3d 1273 at 1292; McCartey v. Massanari, 298 F.3d 1072, 1076-77 (9th Cir. 2002). Because
18 issues still remain concerning the medical evidence in the record from Dr. Mata, and in regard to plaintiff's
19 credibility, residual functional capacity, and ability to perform other jobs existing in significant numbers in
20 the national economy, this matter should be remanded to the Commissioner for further administrative
21 proceedings.

22 CONCLUSION

23 Based on the foregoing discussion, the Court should find the ALJ improperly concluded plaintiff
24 was not disabled, and should reverse the ALJ's decision and remand this matter to the Commissioner for
25 further administrative proceedings in accordance with the findings contained herein.

26 Pursuant to 28 U.S.C. § 636(b)(1) and Federal Rule of Civil Procedure ("Fed. R. Civ. P.") 72(b),
27 the parties shall have ten (10) days from service of this Report and Recommendation to file written
28 objections thereto. See also Fed. R. Civ. P. 6. Failure to file objections will result in a waiver of those
objections for purposes of appeal. Thomas v. Arn, 474 U.S. 140 (1985). Accommodating the time limit

1 imposed by Fed. R. Civ. P. 72(b), the clerk is directed set this matter for consideration on **August 29,**
2 **2008**, as noted in the caption.

3 DATED this 6th day of August, 2008.

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6 Karen L. Strombom
7 United States Magistrate Judge
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